PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/540489

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | |
|---|--|---|---|-----------------------------------|-------------------|-----------------------------------|---|---------------------|------------------------|----|----------------------------|------------------------|
| U.S. NATIONAL STAGE FEES | | | 54 | l | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = | \$ 150 | LAR | GE ENT. = \$ 300 |] | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | Satisfies PCT Arti (4) = \$50/3 | | | ther situations = 5 100 / \$ 200 | 1 | EXAM. FEE | | 1 | EXAM. FEE | 200 |
| SEARCH FEE | | | U.S. is ISA = \$ 5 ALL other coun \$ 200 / \$ 4 | tries = | | other situations = 5 250 / \$ 500 | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS: | | | minus | s 100 = | | / 50 = | | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 5 k minus 20 = , | | ٠ (| 34 | | X \$ 25 = | | OR | X \$ 50 = | 1700 |
| IND | EPENDENT CL | AIMS | \mathcal{Q} minus 3 = . | | * | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | SENT | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL (| 2600 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | | | | SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | NUME PREVIO | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus 1 | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | _ | TOTAL ADDIT. FFF | | ÖR | TOTAL ADDIT. | |
| | | (Column 1) | | (Colum | nn 21 | (Column 3) | | | | | | l |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | ST SER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus * | * | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus * | ** | | = | ſ | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| ** | If the "Highest Nu If the "Highest Nu | mn 1 is less than the mber Previously Paid mber Previously Paid nber Previously Paid | For" IN THIS SPACE | CE is less | than '20 | 9', enter "20". | | FFF Appropriate box | in column 1 | OR | TOTAL ADDIT. | |